## PART B - FEE(S) TRANSMITTAL

| MAY 1 9 2009   | ud this for hi, toget  | mer with applicable   | Co<br>P.<br>Al  | ommissioner for<br>O. Box 1450<br>exandria, Virgi<br>71)-273-2885   |  |  |  |
|--|--|---|---|---|--|--|--|
| INSTRUCTIONS OF HIS  | correspondence including below or directed of                                    | ing the Patent, advance of  | rders and notification of   | maintenance fees v  | vill be mailed to the curren   | should be completed where<br>t correspondence address as<br>parate "FEE ADDRESS" for |  |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  116 7590 04/03/2009  |  |   |   | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. |  |  |  |
| PEARNE & G<br>1801 EAST 9TH<br>SUITE 1200  | 3/200 <del>9</del>   | I h<br>Sta<br>ade<br>tra:   | Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. |   |  |  |  |
| CLEVELAND, OH 44114-3108<br>5/20/2009 HDEMESS2 00000012 09467231   |  |   |   | Susan K. Naughton (Depositor's name)  |  |  |  |
|  |  |   |   | Suran & Nhught (Signature)  |  |  |  |
| 1 FC:1501 1510.0   |  | 00 UP   |   | 5-14-0G   | <u> </u>   | (Date)   |  |
| APPLICATION NO.  | TION NO. FILING DATE FIRST NAMED IN  |   | FIRST NAMED INVENTOR  | ₹   | ATTORNEY DOCKET NO.  | CONFIRMATION NO.   |  |
| 09/467,231<br>TITLE OF INVENTION   | 12/20/1999<br>: DATA PROCESSING  |   | OSHIHIKO MUNETSU<br>D FOR SELECTING ME  |   | NGB-32161<br>ON THE BASIS OF A SCO   | 2093<br>RE   |  |
| APPLN. TYPE  | SMALL ENTITY   | ISSUE FEE DUE   | PUBLICATION FEE DUE   | PREV. PAID ISSU   | E FEE TOTAL FEE(S) DUI   | E DATE DUE   |  |
| nonprovisional   | NO   | \$1510  | \$0   | \$0   | \$1510   | 07/06/2009   |  |
| EXAMINER ART UNIT  |  | CLASS-SUBCLASS  | 7   |   | 0  |  |  |
| NGUYEN, MAIKHANH 2176  |  |   | 715-204000  | J   |  |  |  |
| <ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer</li> </ol> |  |   | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is  3   |   |  |  |  |
| Number is required.  |  | A TO BE PRINTED ON  | listed, no name will be   | <u> </u>  |  |  |  |
| PLEASE NOTE: Unl   | ess an assignee is iden  | tified below no assignee  | data will annear on the   | natent If an assion   | ee is identified below, the  | document has been filed for  |  |
| recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)   |  |   |   |   |  |  |  |
| Panasonic Corporation  |  |   |   | saka, Japan   |  |  |  |
| Please check the appropri  | iate assignee category of  | r categories (will not be pr  | rinted on the patent):  | Individual 🚨 Co   | orporation or other private gr   | roup entity Government   |  |
| 4a. The following fee(s) are submitted:  Size Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies   |  |   | D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 16-0820 (enclose an extra copy of this form).   |   |  |  |  |
|  | tus (from status indicate<br>s SMALL ENTITA) stati                               |   | Dh. Applicant is no los   | agar alaimina SMAI  | L ENTITY status. See 37 C  | PER 1 27(-)(2)::   |  |
|  |  |   | d from anyone other than  | the applicant; a regi   | stered attorney or agent; or t   | the assignee or other party in   |  |
| Authorized Signature   | / f/k  | y Jegle   |   | Date  | 5/14/09  |  |  |
| Typed or printed name  | Jeffrey  | 1/./Šopko   | 7   | Registration N  | o. 27676   |  |  |
| This collection of information application. Confident submitting the completed   | ation is required by 37 C<br>iality is governed by 35<br>application form to the | CFR 1.311. The information U.S.C. 122 and 37 CFR by USPTO. Time will vary | on is required to obtain or<br>1.14. This collection is es<br>depending upon the indi   | retain a benefit by the timated to take 12 revidual case. Any co  | he public which is to file (an<br>ninutes to complete, includi<br>mments on the amount of ti | nd by the USPTO to process) ng gathering, preparing, and ime you require to complete |  |

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